



HUMAN RESOURCES

Address 190 Queen Anne Ave N
PO Box 19028

Seattle, WA 98109

Telephone 206-615-3300

Website www.seattlehousing.org

October 29, 2019

These notices are for your information only. No immediate action is required.

Dear Seattle Housing Authority COBRA Participant:

The City of Seattle provides important information/notices annually so that you know your City health care coverage rights and responsibilities. This mailing includes four notices. Not all of the notices may apply to the medical plan and/or coverage you have elected. **File the documents with your other important papers**, so that you can refer to them later.

1. Women's 1998 Health and Cancer Rights Act (page 2)

→ Applies to retirees with medical coverage and to their enrolled spouse/domestic partner or child(ren).

2. Grandfathered Plan Notice (page 2)

→ Applies to retirees with medical coverage and to their enrolled spouse/domestic partner or child(ren).

3. Medicare Part D (Creditable Coverage) (pages 3-4)

→ Applies to members enrolled in a City of Seattle sponsored Medicare plan; confirms your prescription drug coverage is at least as good as Medicare Part D coverage.

4. Medicaid and the Children's Health Insurance Program (CHIP) Notification (page 5)

→ Notification of premium assistance.

If you have questions about these notices or your medical coverage, please contact the appropriate organization listed on the next page.

Executive Director
Andrew Lofton

Contact Information:

Aetna	877-292-2480	www.AetnaNavigator.com
Kaiser Permanente	888-901-4636	www.kp.org/wa
Seattle Housing Authority	206-615-3328	email: patricia.anderson@seattlehousing.org

Women’s 1998 Health and Cancer Rights Act

****Annual Notice****

As required by the Women’s Health and Cancer Rights Act of 1998, the group health plans offered by the City of Seattle provide coverage for the following services to an individual receiving plan benefits in connection with a mastectomy:

- Reconstruction of the breast on which the mastectomy has been performed;
- Surgery and reconstruction of the other breast to produce a symmetrical appearance; and
- Prosthesis and physical complications for all stages of a mastectomy, including lymphedemas (swelling associated with the removal of lymph nodes).

A group health plan must determine the manner of coverage in consultation with the attending physician and patient. Coverage for breast reconstruction and related services will be subject to deductibles, copays, and/or coinsurance amounts that are consistent with those that apply to other benefits under the plan. Contact your health plan for more information.

Health Care Reform Notice -- Grandfathered Plan Status Disclosure

The City of Seattle Aetna, United Healthcare, and Kaiser Permanente medical plans are “grandfathered health plans” under the Patient Protection and Affordable Care Act (the Affordable Care Act). As permitted by the Affordable Care Act, a grandfathered health plan can preserve certain basic health coverage that was already in effect when that law was enacted. Being a grandfathered health plan means that your plan may not include certain consumer protections of the Affordable Care Act that apply to other plans, for example, the requirement for the provision of preventive health services without any cost sharing. However, grandfathered health plans must comply with certain other consumer protections in the Affordable Care Act, for example, the elimination of lifetime limits on benefits. Questions? Contact Central Benefits at (206) 615-3328.

Important Notice from the City of Seattle About Your Prescription Drug Coverage and Medicare for Plan Year 2019

Please read this notice carefully and keep it where you can find it. This notice has information about your current prescription drug coverage with City of Seattle and about your options under Medicare's prescription drug coverage. This information can help you decide whether or not you want to join a Medicare drug plan. If you are considering joining, you should compare your current coverage, including which drugs are covered at what cost, with the coverage and costs of the plans offering Medicare prescription drug coverage in your area. Information about where you can get help to make decisions about your prescription drug coverage is at the end of this notice.

There are two important things you need to know about your current coverage and Medicare's prescription drug coverage:

- 1 Medicare prescription drug coverage became available in 2006 to everyone with Medicare. You can get this coverage if you join a Medicare Prescription Drug Plan or join a Medicare Advantage Plan (like an HMO or PPO) that offers prescription drug coverage. All Medicare drug plans provide at least a standard level of coverage set by Medicare. Some plans may also offer more coverage for a higher monthly premium.
- 2 City of Seattle has determined that the prescription drug coverage offered by the Aetna, Group Health, and United Health Care is, on average for all plan participants, expected to pay out as much as standard Medicare prescription drug coverage pays and is therefore considered Creditable Coverage. Because your existing coverage is Creditable Coverage, you can keep this coverage and not pay a higher premium (a penalty) if you later decide to join a Medicare drug plan.

When Can You Join a Medicare Drug Plan?

You can join a Medicare drug plan when you first become eligible for Medicare and each year from November 15 through December 31.

However, if you lose your current creditable prescription drug coverage, through no fault of your own, you will also be eligible for a two (2) month Special Enrollment Period (SEP) to join a Medicare drug plan.

What Happens to Your Current Coverage if You Decide to Join a Medicare Drug Plan?

If you decide to join a Medicare drug plan, your current City of Seattle coverage will be affected. Your current prescription drug coverage is part of a City of Seattle medical plan. You cannot drop your City of Seattle prescription drug coverage unless you also drop your City of Seattle medical coverage. If you enroll in an individual Medicare Part D prescription drug plan and drop your creditable coverage with the City of Seattle, you and your dependents will not be able to return to the City of Seattle plan. If you or your dependents enroll in a different employer active employee or retiree group medical plan with creditable Part D coverage, and drop your creditable coverage with the City of Seattle, you and your dependents will be able to return if you involuntarily lose coverage on the employer group plan. It is important that you compare your current plan, including which drugs are covered, with the coverage and costs of Medicare part D plans.

If you do decide to join a Medicare drug plan and drop your current City of Seattle coverage, be aware that you and your dependents may not be able to get this coverage back.

When Will You Pay a Higher Premium (Penalty) to Join a Medicare Drug Plan?

You should also know that if you drop or lose your current coverage with City of Seattle and don't join a Medicare drug plan within 63 continuous days after your current coverage ends, you may pay a higher premium (a penalty) to join a Medicare drug plan later.

If you go 63 continuous days or longer without creditable prescription drug coverage, your monthly premium may go up by at least 1% of the Medicare base beneficiary premium per month for every month that you did not have that coverage. For example, if you go nineteen months without creditable coverage, your premium may consistently be at least 19% higher than the Medicare base beneficiary premium. You may have to pay this higher premium (a penalty) as long as you have Medicare prescription drug coverage. In addition, you may have to wait until the following November to join.

For More Information About This Notice or Your Current Prescription Drug Coverage...

Contact your medical plan for further information. **NOTE:** You'll receive this notice each year. You will also receive it before the next period you can join a Medicare drug plan, and if this coverage through City of Seattle changes. You also may request a copy of this notice at any time.

For More Information About Your Options Under Medicare Prescription Drug Coverage...

More detailed information about Medicare plans that offer prescription drug coverage is in the "Medicare & You" handbook. You'll get a copy of the handbook in the mail every year from Medicare. You may also be contacted directly by Medicare drug plans.

For more information about Medicare prescription drug coverage:

- Visit www.medicare.gov
- Call your State Health Insurance Assistance Program (see the inside back cover of your copy of the "Medicare & You" handbook for their telephone number) for personalized help
- Call 1-800-MEDICARE (1-800-633-4227). TTY users should call 1-877-486-2048.

If you have limited income and resources, extra help paying for Medicare prescription drug coverage is available. For information about this extra help, visit Social Security on the web at www.socialsecurity.gov, or call them at 1-800-772-1213 (TTY 1-800-325-0778).

Remember: Keep this Creditable Coverage notice. If you decide to join one of the Medicare drug plans, you may be required to provide a copy of this notice when you join to show whether or not you have maintained creditable coverage and, whether or not you are required to pay a higher premium (a penalty).

Date:	10/29/2019
Contact:	Seattle Housing Authority
Address:	P.O. Box 34028 Seattle, WA 98124-4028
Phone Number:	206-615-1340

CMS Form 10182-CC

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0990. The time required to complete this information collection is estimated to average 8 hours per response initially, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

Medicaid and the Children's Health Insurance Program (CHIP) Offer Free Or Low-Cost Health Coverage To Children And Families

If you are eligible for health coverage from your employer, but are unable to afford the premiums, some States have premium assistance programs that can help pay for coverage. These States use funds from their Medicaid or CHIP programs to help people who are eligible for employer-sponsored health coverage, but need assistance in paying their health premiums.

If you or your dependents are already enrolled in Medicaid or CHIP and you live in a State listed below, you can contact your State Medicaid or CHIP office to find out if premium assistance is available.

If you or your dependents are NOT currently enrolled in Medicaid or CHIP, and you think you or any of your dependents might be eligible for either of these programs, you can contact your State Medicaid or CHIP office or dial **1-877-KIDS NOW** or **www.insurekidsnow.gov** to find out how to apply. If you qualify, you can ask the State if it has a program that might help you pay the premiums for an employer-sponsored plan.

Once it is determined that you or your dependents are eligible for premium assistance under Medicaid or CHIP, your employer's health plan is required to permit you and your dependents to enroll in the plan – as long as you and your dependents are eligible, but not already enrolled in the employer's plan. This is called a "special enrollment" opportunity, and **you must request coverage within 60 days of being determined eligible for premium assistance.**

You may be eligible for assistance paying your employer health plan premiums. Contact the Medicaid office for Washington for further information on eligibility.

Washington – Medicaid

Website: <http://hrsa.dshs.wa.gov/premiumpymt/Apply.shtm>

Phone: 1-800-562-3022 ext. 15473

For more information on special enrollment rights, you can contact either:

U.S. Department of Labor
Employee Benefits Security Administration
Services
www.dol.gov/ebsa
1-866-444-EBSA Ext. 3272

U.S. Department of Health and Human
Services
Centers for Medicare and Medicaid
www.cms.hhs.gov
1-877-267-2323 Ext. 61565

Sincerely,



Marc Nilsen
HR Director